

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	7531	
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		71473	9-15-00
RESPONSE FORMALITY REVIEW		71473	11-22-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	04/01/01
2	✓	✓	04/01/01
3	✓	✓	04/01/01
4	✓	✓	04/01/01
5	✓	✓	04/01/01
6	✓	✓	04/01/01
7	✓	✓	04/01/01
8	✓	✓	04/01/01
9	✓	✓	04/01/01
10	✓	✓	04/01/01
11	✓	✓	04/01/01
12	✓	✓	04/01/01
13	✓	✓	04/01/01
14	✓	✓	04/01/01
15	✓	✓	04/01/01
16	✓	✓	04/01/01
17	✓	✓	04/01/01
18	✓	✓	04/01/01
19	✓	✓	04/01/01
20	✓	✓	04/01/01
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26	✓	✓	04/01/01
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28	✓	✓	04/01/01
29	✓	✓	04/01/01
30	✓	✓	04/01/01
31	✓	✓	04/01/01
32	✓	✓	04/01/01
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42	✓	✓	04/01/01
43	✓	✓	04/01/01
44	✓	✓	04/01/01
45	✓	✓	04/01/01
46	✓	✓	04/01/01
47	✓	✓	04/01/01
48	✓	✓	04/01/01
49	✓	✓	04/01/01
50	✓	✓	04/01/01

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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